

## Funding Sources Form

<b>Funding Source</b> (also identify if it will be Match or reimbursed by LWCF)	<b>Date Committed</b>	<b>Amount</b>
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<input type="checkbox"/> LWCF <input type="checkbox"/> Match		
<b>Grand Total All Funding Sources</b> (Estimated Total Project Cost)		

The Applicant understands that the Project cannot be funded unless the total amount of Committed Funds equals the estimated Total Project Cost. **The Applicant understands the definition of Committed Funds and** the Applicant certifies that they have eligible Match sources and can finance 100 percent of the Project, which will be partially reimbursed at the Rate of Reimbursement.

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Applicant's Authorized Representative Signature

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Date